

SCHEDULE D Income – Gifts

► NAME OF SOURCE (Not an Acronym)

Mark P. Smith

ADDRESS (Business Address Acceptable)

350 South Figueroa Street, Suite 1002, Los Angeles, CA 90071

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government Official

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 12 / 19	\$ 50.00	ADL Sherwood Family Prize Event Ticket

___/___/___	\$ _____	_____
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___/___/___	\$ _____	_____
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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___/___/___	\$ _____	_____

___/___/___	\$ _____	_____
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___/___/___	\$ _____	_____
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___/___/___	\$ _____	_____
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Filer's Verification

Print Name Florence Yu

Office, Agency or Court Police

Statement Type ☒ 2018/2019 Annual ☐ Assuming ☐ Leaving
☐ _____ Annual ☐ Candidate
(yr)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/11/2020 12:28 PM
(month, day, year)

Filer's Signature Electronic Submission

Comments: _____